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PTO/SB/01 (10-00)

Approved for use through 10/31/2002. OMB 0651-0032

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**DECLARATION FOR UTILITY OR
DESIGN
PATENT APPLICATION
(37 CFR 1.63)**

Declaration Submitted With Initial Filing Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)

Attorney Docket Number	PU030253
First Named Inventor	Eric Richard May et al.
COMPLETE IF KNOWN	
Application Number	/
Filing Date	
Group Art Unit	
Examiner Name	

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

VISUAL DISPLAY WALL MOUNTING APPARATUS

the specification of which *(Title of the Invention)*

is attached hereto

OR

was filed on (MM/DD/YYYY) **08/05/2004** as United States Application Number or PCT International

Application Number **PCT/US2004/025299** was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims as amended specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY) Country	Priority Not Claimed	Certified Copy Attached?
			<input type="checkbox"/>	<input type="checkbox"/> YES <input type="checkbox"/> NO
			<input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>

Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

ApplicationNumber(s)	Filing Date (MM/DD/YYYY)	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.
60/498,264	August 26, 2003	

[Page 1 of 2]

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

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DECLARATION — Utility or Design Patent Application

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Country USA	Telephone 609-734-6834	Fax (609) 734 - 6888	

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR: A petition has been filed for this unsigned inventor

Given Name ERIC RICHARD	Family Name MAY or Surname
----------------------------	-------------------------------

Inventor's Signature <i>Eric Richard May</i>	Date <i>8/9/2004</i>
---	-------------------------

Residence: City INDIANAPOLIS	State INDIANA	Country US	Citizenship US
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Mailing Address

Mailing Address 1421 FENWICK AVENUE

City INDIANAPOLIS	State INDIANA	ZIP 46219	Country US
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NAME OF SECOND INVENTOR: A petition has been filed for this unsigned inventor

Given Name SCOTT JOSEPH	Family Name DUGGAN or Surname
----------------------------	----------------------------------

Inventor's Signature <i>Scott Joseph Duggan</i>	Date <i>8-3-2004</i>
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Residence: City INDIANAPOLIS	State INDIANA	Country US	Citizenship US
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Mailing Address

Mailing Address 7901 LANTERN ROAD

City INDIANAPOLIS	State INDIANA	ZIP 46256	Country US
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Additional inventors are being named on the _____ supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.

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Approved for use through 11/30/2005. OMB 0651-0035
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POWER OF ATTORNEY
and
CORRESPONDENCE ADDRESS
INDICATION FORM

Application Number	
Filing Date	
First Named Inventor	ERIC RICHARD MAY et al.
Title	VISUAL DISPLAY WALL MOUNTING DEVICE
Art Unit	
Examiner Name	
Attorney Docket Number	PU030253

I hereby appoint:

Practitioners at Customer Number
OR

Practitioner(s) named below:

Customer Number 24498

Name	Registration Number

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the Patent and Trademark Office connected therewith.

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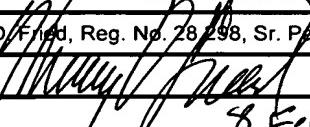
The address associated with Customer Number:
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<input checked="" type="checkbox"/> Firm or Individual Name	Joseph S. Tripoli, Patent Operations			
Address				
Address	P. O. BOX 5312			
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Country	USA			
Telephone	609-734-6834	Fax	609-734-6888	

I am the:

Applicant/Inventor.
 Assignee of record of the entire interest. See 37 CFR 3.71.
Certificate under 37 CFR 3.75(b) is enclosed. (Form PTO/SB/96).

SIGNATURE of Applicant or Assignee of Record

Name	Harvey D. Fried, Reg. No. 28,298, Sr. Patent Counsel, Thomson Licensing Inc.		
Signature			
Date	8 Feb 2006	Telephone	609-734-6811

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required.
Submit multiple forms if more than one signature is required, see below*.

*Total of 3 forms are submitted.

This collection of information is required by 37 CFR 1.31 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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do hereby grant

Joseph S. Tripoli
Senior Vice President
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Princeton, New Jersey 08540

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DATED this 7 day of July, in the year 2005.



Signature:

Typed Name As Signed:

Title:

Julian Waldron

President

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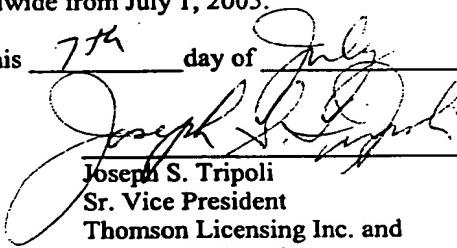
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DATED this 7th day of July, 2005.

SIGNED


Joseph S. Tripoli
Sr. Vice President
Thomson Licensing Inc. and
Attorney In Fact for
THOMSON LICENSING

WITNESS


Davida Fornasetti